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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☒ Declaration  
Submitted  
With Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

3800.06

First Named Inventor

John

IRVING

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method AND SYSTEM FOR INTERACTIVE, MULTI-USER  
ELECTRONIC DATA TRANSMISSION IN A MULTILEVEL  
MONITORED AND FILTERED SYSTEM

(Title of the invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

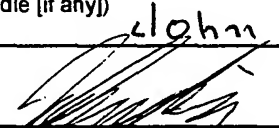
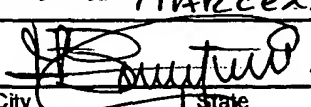
[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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Name <b>JAMES D. FORNARI, ESQ</b>			
Address <b>645 MADISON AVENUE - 13<sup>TH</sup> FLOOR</b>			
City <b>New York</b>		State <b>New York</b>	ZIP <b>10022</b>
Country <b>USA</b>	Telephone <b>212-698-0567</b>	Fax <b>212-898-0573</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>John</b>		Family Name or Surname <b>IRVING</b>	
Inventor's Signature 		Date <b>June 19, 2003</b>	
Residence: City <b>352 DALY STREET OTTOWA</b>	State <b>ONT</b>	Country <b>CANADA</b>	Citizenship <b>CANADIAN</b>
Mailing Address <b>352 DALY STREET</b>			
City <b>OTTOWA</b>	State <b>ONT</b>	ZIP <b>K1N 6G9</b>	Country <b>CANADA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Marcello</b>		Family Name or Surname <b>BURSZEIN</b>	
Inventor's Signature 		Date <b>JUNE 19, 2003</b>	
Residence: City <b>OTTOWA</b>	State <b>ONT</b>	Country <b>CANADA</b>	Citizenship <b>ARGENTINEAN N.B. CANADIAN</b>
Mailing Address <b>335 COOPER STREET - APT 23</b>			
City <b>OTTOWA</b>	State <b>ONT</b>	ZIP <b>K2P 0G6</b>	Country <b>CANADA</b>
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>2</u> of <u>2</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
STEVE		MULLIGAN	
Inventor's Signature <i>Steve Mulligan</i>		Date <i>Jun 19/2003</i>	
Residence: City OTTAWA	State ONT	Country CANADA	Citizenship CANADIAN
Mailing Address 125 STEWART STREET -APT 404			
Mailing Address			
City OTTAWA	State ONT	Zip K1N 6J3	Country CANADA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
PATRICIE		LAJEUNESSE	
Inventor's Signature <i>Pat 2</i>		Date <i>June 19/2003</i>	
Residence: City OTTAWA	State ONT	Country CANADA	Citizenship CANADIAN
Mailing Address 35 LANGEVIN AVENUE			
Mailing Address			
City OTTAWA	State ONT	Zip K1N 1G1	Country CANADA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
PIERRE		RILLEEN	
Inventor's Signature <i>Pierre</i>		Date <i>JUNE 19, 2003</i>	
Residence: City <del>310 OTTAWA</del>	State <del>ONT</del>	Country CANADA	Citizenship CANADIAN
Mailing Address 31 Queen Mary ST			
Mailing Address			
City OTTAWA	State ONT	Zip K1K 1K8	Country CANADA

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## DECLARATION – Supplemental Priority Data Sheet

**Additional foreign applications:**

[illegible]

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**POWER OF ATTORNEY OR  
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Application Number

Filing Date

First Named Inventor

Title

Art Unit

Examiner Name

Attorney Docket Number

John IRVING

I hereby appoint:

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☒

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JAMES D. FORNARI	25,260

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JAMES D. FORNARI

645 MADISON AVENUE - 13<sup>th</sup> FLOOR

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Zip

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212-698-0567

Fax

212-698-0573

I am the:

☒

Applicant/Inventor.

☐

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

John IRVING

[Signature]

June 19, 2003

Telephone

1-888-770-3333

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒

Total of 5 forms are submitted.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

MARCELLO BURSZEIN

Signature

Date

June 19, 2003

Telephone

1-888-770-3333

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212-698-0567

Fax

212-698-0573

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

STEVE MULLIGAN

Signature

Steve Mulligan

Date

Jan 19/2008

Telephone

1-888-770-3333

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\*Total of

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forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

PATRICK LAJEUNESSE

[Signature]

June 19/2003

Telephone

1-888-770-3333

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☒

Applicant/Inventor.

☐Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	PIERRE KILLEN		
Signature	<i>Pierre Killen</i>		
Date	June 19, 2003	Telephone	1-888-770-3333

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